

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

Irvin for Congress

ADDRESS (number and street)

p.o. box 30096

Check if different  
than previously  
reported. (ACC)

columbia

MO

65205

2. FEC IDENTIFICATION NUMBER ▼

C

C00561142

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

MO

04

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the  
State of

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the  
State of

5. Covering Period

M M /

D D /

Y Y Y Y

through

M M /

D D /

Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Nathaniel Augustus Irvin

Signature of Treasurer

Nathaniel Augustus Irvin

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

10

15

2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 16

Write or Type Committee Name

**Irvin for Congress**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	7		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	4

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	3805.00	9232.00
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	3805.00	9232.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	5153.47	9445.95
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	5153.47	9445.95
8. Cash on Hand at Close of Reporting Period (from Line 27).....	820.41	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**POST-ELECTION DETAILED SUMMARY PAGE**

## Report of Receipts and Disbursements

FEC Form 3 (Revised 07/05)

PAGE 3 / 16

- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

Irvin for Congress

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
07		17		2014

To:

M M	/	D D	/	Y Y Y Y
09		30		2014

**I. RECEIPTS****COLUMN A**  
Total this Period**COLUMN B**  
Election Cycle Total as of

M M	/	D D	/	Y Y Y Y
08		05		2014

(date of general election)

**COLUMN C**  
Total for

M M	/	D D	/	Y Y Y Y
08		06		2014

(date after general election)

## through

M M	/	D D	/	Y Y Y Y
09		30		2014

(last day of reporting period)

**11. CONTRIBUTIONS**

(other than loans) FROM:

- (a) Individuals/Persons Other than Political Committees
- (i) Itemized (use Schedule A)

500.00
--------

5900.00
---------

0.00
------

(ii) Unitemized

2655.00
---------

3332.00
---------

2305.00
---------

(iii) Total of contributions from individuals

3155.00
---------

9232.00
---------

2305.00
---------

(b) Political Party Committees

200.00
--------

0.00
------

200.00
--------

(c) Other Political Committees

450.00
--------

0.00
------

450.00
--------

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 4 / 16

<b>COLUMN A</b> <b>Total this Period</b>	<b>COLUMN B</b> <b>Election Cycle Total as of *</b> (date of general election) (* See page 5 for date)	<b>COLUMN C</b> <b>Total for *</b> (date after general election) <b>through *</b> (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
3805.00	9232.00	2955.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))		
0.00	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)		
0.00	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
0.00	0.00	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
3805.00	9232.00	2955.00

**POST-ELECTION DETAILED SUMMARY PAGE**

## Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 5 / 16

Write or Type Committee Name

Irvin for Congress

Report Covering the Period:

From:

M M / D D / Y Y Y Y  
07 / 17 / 2014

To:

M M / D D / Y Y Y Y  
09 / 30 / 2014**II. DISBURSEMENTS**

<b>COLUMN A</b> Total this Period	<b>COLUMN B</b> Election Cycle Total as of * (date of general election) (* See page 5 for date)	<b>COLUMN C</b> Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
<b>17. OPERATING EXPENDITURES</b>		
5153.47	9445.95	2120.64
<b>18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES</b>		
0.00	0.00	0.00
<b>19. LOAN REPAYMENTS:</b>		
(a) Of Loans Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) Of All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))		
0.00	0.00	0.00
<b>20. REFUNDS OF CONTRIBUTIONS TO:</b>		
(a) Individuals/Persons Other Than Political Committees		
0.00	0.00	0.00
(b) Political Party Committees		
0.00	0.00	0.00

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 6 / 16

<b>COLUMN A</b> <b>Total this Period</b>	<b>COLUMN B</b> <b>Election Cycle Total as of *</b> (date of general election) (* See page 5 for date)	<b>COLUMN C</b> <b>Total for *</b> (date after general election) <b>through *</b> (last day of reporting period) (* See page 5 for dates)
---	---	--

(c) Other Political Committees (such as PACs)

0.00

0.00

0.00

(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))

0.00

0.00

0.00

**21. OTHER DISBURSEMENTS**

0.00

0.00

0.00

**22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)**

5153.47

9445.95

2120.64

**III. NET CONTRIBUTIONS (OTHER THAN LOANS)**

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e))

3805.00

9232.00

2955.00

**IV. NET OPERATING EXPENDITURES**

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

5153.47

9445.95

2120.64

**V. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....

24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....

25. SUBTOTAL (add Line 23 and Line 24).....

26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)

2168.88

3805.00

5973.88

5153.47

820.41

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:

PAGE 7 OF 16

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Irvin for Congress

Full Name (Last, First, Middle Initial)

Mark Prugh

Mailing Address 828 historic Rt. 66

City

Waynesville

State

MO

Zip Code

65583

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Attorney

Receipt For: 2014

☐ Primary  
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		30		2014

Transaction ID : SA11Al.4727

Amount of Each Receipt this Period

500.00

event contribution

Full Name (Last, First, Middle Initial)

B. Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C. Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify)
☐ General

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

500.00

500.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 8 OF 16

<input type="checkbox"/> 11a 12	<input checked="" type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
------------------------------------	--	-------------------------------------	------------------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**Irvin for Congress****A.** Full Name (Last, First, Middle Initial)  
**Democratic Club Moniteau County**

Mailing Address po box 324

City	State	Zip Code
tipton	MO	65081

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Democratic PartyOccupation  
County Club

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		28		2014

Transaction ID : SA11B.4692

Amount of Each Receipt this Period

200.00

event contribution

**B.** Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

200.00

200.00



# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
Irvin for Congress

Full Name (Last, First, Middle Initial)

**A. Central Committee Boone County Democratic**

Mailing Address p.o. box 1295

City State Zip Code  
columbia MO 65202

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Democratic Party

Occupation  
Central Committee

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M / D D / Y Y Y Y  
08 12 2014

Transaction ID : SA11C.4700

Amount of Each Receipt this Period

300.00

mailed contribution

Full Name (Last, First, Middle Initial)

**B. Democratic Committee Cooper County**

Mailing Address Booneville

City State Zip Code  
Booneville MO 65233

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Democratic Party

Occupation  
Central Committee

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

50.00

Date of Receipt

M M / D D / Y Y Y Y  
08 11 2014

Transaction ID : SA11C.4708

Amount of Each Receipt this Period

50.00

Event Contribution

Full Name (Last, First, Middle Initial)

**C. Central Committee Moniteau County**

Mailing Address po box 324

City State Zip Code  
tipton MO 65081

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Democratic Party

Occupation  
Central Committee

Receipt For: 2014

☐ Primary ☒ General  
☐ Other (specify)

Election Cycle-to-Date

100.00

Date of Receipt

M M / D D / Y Y Y Y  
08 28 2014

Transaction ID : SA11C.4689

Amount of Each Receipt this Period

100.00

event contribution

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

450.00

450.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Irvin for Congress

Full Name (Last, First, Middle Initial)

**A. Democratic Party Boone County**

Mailing Address 912 E Walnut

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		28		2014

City	State	Zip Code
Columbia	MO	65201

Amount of Each Disbursement this Period

300.00
--------

Purpose of Disbursement  
Rent: Office Space

001

Transaction ID : SB17.4751

Candidate Name

Irvin for Congress

Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House	Disbursement For: 2014
	<input type="checkbox"/> Senate	
	<input type="checkbox"/> President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: MO District: 04

Full Name (Last, First, Middle Initial)

**B. Democratic Party Boone County**

Mailing Address 912 E Walnut

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		28		2014

City	State	Zip Code
Columbia	MO	65201

Amount of Each Disbursement this Period

300.00
--------

Purpose of Disbursement  
Rent: Office Space

001

Transaction ID : SB17.4766

Candidate Name

Irvin for Congress

Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House	Disbursement For: 2014
	<input type="checkbox"/> Senate	
	<input type="checkbox"/> President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: MO District: 04

Full Name (Last, First, Middle Initial)

**c. Group Borich**

Mailing Address p.o. box 410584

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		21		2014

City	State	Zip Code
Kansas City	MO	64108

Amount of Each Disbursement this Period

1500.00
---------

Purpose of Disbursement  
001 Consulting: Finance

001

Transaction ID : SB17.4747

Candidate Name

Irvin for Congress

Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House	Disbursement For: 2014
	<input type="checkbox"/> Senate	
	<input type="checkbox"/> President	
		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

State: MO District: 04

**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1800.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Irvin for Congress

Full Name (Last, First, Middle Initial)

**A. Group Borich**

Mailing Address p.o. box 410584

City	State	Zip Code
Kansas City	MO	64108

Purpose of Disbursement  
Consulting: Finance

001

Candidate Name

Irvin for Congress

Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State: MO District: 04

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		21		2014

Amount of Each Disbursement this Period

75.00
-------

Transaction ID : SB17.4773

[MEMO ITEM]

**B. Group Borich**

Mailing Address p.o. box 410584

City	State	Zip Code
Kansas City	MO	64108

Purpose of Disbursement  
001 Consulting: Finance

001

Candidate Name

Irvin for Congress

Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State: MO District: 04

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		21		2014

Amount of Each Disbursement this Period

1500.00
---------

Transaction ID : SB17.4774

[MEMO ITEM]

**c. Group Borich**

Mailing Address p.o. box 410584

City	State	Zip Code
Kansas City	MO	64108

Purpose of Disbursement  
Consulting: Finance

001

Candidate Name

Irvin for Congress

Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State: MO District: 04

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		01		2014

Amount of Each Disbursement this Period

1000.00
---------

Transaction ID : SB17.4746

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00
---------

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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 16

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Irvin for Congress

Full Name (Last, First, Middle Initial)

**A. Group Borich**

Mailing Address p.o. box 410584

City	State	Zip Code
Kansas City	MO	64108

Purpose of Disbursement  
Consulting: Finance

001

Category/  
Type

Candidate Name

Irvin for Congress

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State: MO

District: 04

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		01		2014

Amount of Each Disbursement this Period

1000.00
---------

Transaction ID : SB17.4775

[MEMO ITEM]

**B. Group Borich**

Mailing Address p.o. box 410584

City	State	Zip Code
Kansas City	MO	64108

Purpose of Disbursement  
Consulting: Financial Consulting

001

Category/  
Type

Candidate Name

Irvin for Congress

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State: MO

District: 04

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		18		2014

Amount of Each Disbursement this Period

1000.00
---------

Transaction ID : SB17.4745

**c. Group Borich**

Mailing Address p.o. box 410584

City	State	Zip Code
Kansas City	MO	64108

Purpose of Disbursement  
Consulting: Financial Consulting

001

Category/  
Type

Candidate Name

Irvin for Congress

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State: MO

District: 04

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		18		2014

Amount of Each Disbursement this Period

1000.00
---------

Transaction ID : SB17.4776

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00
---------

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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 16

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Irvin for Congress

Full Name (Last, First, Middle Initial)

**A. Apps Google**

Mailing Address 1600 Amphitheatre Pkw

City	State	Zip Code
Mountain View	CA	94043

Purpose of Disbursement  
overhead: Email service

001

Category/  
Type

Candidate Name

Irvin for Congress

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State: MO

District: 04

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		05		2014

Amount of Each Disbursement this Period

28.54
-------

Transaction ID : SB17.4772

[MEMO ITEM]

**B. Greg Hagan**

Mailing Address 2401 W. Broadway

City	State	Zip Code
Columbia	MO	64093

Purpose of Disbursement  
Consulting: Management

001

Category/  
Type

Candidate Name

Irvin for Congress

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State: MO

District: 04

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		03		2014

Amount of Each Disbursement this Period

850.00
--------

Transaction ID : SB17.4748

**c. Greg Hagan**

Mailing Address 2401 W. Broadway

City	State	Zip Code
Columbia	MO	64093

Purpose of Disbursement  
Consulting: Management

001

Category/  
Type

Candidate Name

Irvin for Congress

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State: MO

District: 04

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		03		2014

Amount of Each Disbursement this Period

850.00
--------

Transaction ID : SB17.4767

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

850.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 16

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Irvin for Congress

Full Name (Last, First, Middle Initial)

**A. Margaret Miller**Mailing Address 102 E Green Meadows Rd  
#6

City columbia State MO Zip Code 65203

Purpose of Disbursement  
Office Supplies: Address Labels

Candidate Name

Irvin for Congress

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State: MO District: 04

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		13		2014

Amount of Each Disbursement this Period

53.98
-------

Transaction ID : SB17.4765

[MEMO ITEM]

**B. Web Service Nationbuilder**Mailing Address 448 s. hill st.  
suite 200

City los angeles State CA Zip Code 90013

Purpose of Disbursement  
Overhead: Website

Candidate Name

Irvin for Congress

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State: MO District: 04

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		29		2014

Amount of Each Disbursement this Period

49.00
-------

Transaction ID : SB17.4768

[MEMO ITEM]

**c. Web Service Nationbuilder**Mailing Address 448 s. hill st.  
suite 200

City los angeles State CA Zip Code 90013

Purpose of Disbursement  
Overhead: Website

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		08		2014

Amount of Each Disbursement this Period

49.00
-------

Transaction ID : SB17.4778

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 16

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Irvin for Congress

Full Name (Last, First, Middle Initial)

**A. Columbia MO Petromart 46**

Mailing Address 2200 W Ash St.

City	State	Zip Code
Columbia	MO	65203

Purpose of Disbursement  
Travel: Fuel

002

Candidate Name

Irvin for Congress

Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State: MO District: 04

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		21		2014

Amount of Each Disbursement this Period

45.29
-------

Transaction ID : SB17.4770

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Columbia MO Petromart 46**

Mailing Address 2200 W Ash St.

City	State	Zip Code
Columbia	MO	65203

Purpose of Disbursement  
travel expense:fuel

002

Candidate Name

Irvin for Congress

Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State: MO District: 04

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		31		2014

Amount of Each Disbursement this Period

35.00
-------

Transaction ID : SB17.4771

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**c. Columbia MO Petromart 46**

Mailing Address 2200 W Ash St.

City	State	Zip Code
Columbia	MO	65203

Purpose of Disbursement  
Travel Expense: Fuel

002

Candidate Name

Irvin for Congress

Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State: MO District: 04

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		05		2014

Amount of Each Disbursement this Period

34.91
-------

Transaction ID : SB17.4780

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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(check only one)

PAGE 16 OF 16

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Irvin for Congress

Full Name (Last, First, Middle Initial)

**A. Columbia MO Petromart 46**

Mailing Address 2200 W Ash St.

City	State	Zip Code
Columbia	MO	65203

Purpose of Disbursement  
Travel Expense: Fuel

002

Category/  
Type

Candidate Name

Irvin for Congress

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State: MO District: 04

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		09		2014

Amount of Each Disbursement this Period

19.19
-------

Transaction ID : SB17.4782

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Phone Company Straight Talk Inc**

Mailing Address 9700 NW 112th Ave

City	State	Zip Code
Miami	FL	33178

Purpose of Disbursement  
overhead: campaign phone

001

Category/  
Type

Candidate Name

Irvin for Congress

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify)

State: MO District: 04

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		15		2014

Amount of Each Disbursement this Period

113.56
--------

Transaction ID : SB17.4769

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

Amount of Each Disbursement this Period

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**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00
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4650.00
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